

FORM PTO-1083

Case Docket No. PD-1294

In re Application of Gary R. Grotendorst et al.  
Serial No. 07/752,427

Date: November 4, 1992

Filed: August 30, 1991

For: CONNECTIVE TISSUE GROWTH FACTOR

COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment/response in the above-identified application.

- ☒ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.  
☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.  
☐ No additional fee is required.  
☐ Information Disclosure Statement

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) SMALL PRESENT EXTRA	SMALL RATE	ENTITY ADDIT. FEE OR	OTHER THAN A SMALL RATE	ENTITY ADDIT. FEE
TOTAL	* MINUS **	=	x11	\$	OR	x22	\$
INDEP CLAIMS	* MINUS ***	=	x37	\$	OR	x74	\$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			+115	\$	OR	+230	\$
			TOTAL	\$	OR	TOTAL	\$

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

☐ Please charge my Deposit Account No. 19-3725 the amount of \$\_\_\_\_\_. A duplicate copy of this sheet is enclosed.

☒ A check in the amount of \$ 420.00 to cover the extension fee is enclosed.

☐ A check in the amount of \$\_\_\_\_\_ to cover the filing fee is enclosed.

☐ A check in the amount of \$200.00 to cover the Information Disclosure Statement.

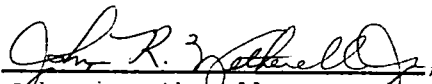
☐ A check in the amount of \$130.00 to cover the Information Disclosure Statement.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-3725. A duplicate copy of this sheet is enclosed.

☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.

☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

  
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